Effective December 29, 1999 Output Description Record Descripti														7	
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL ENTITY TYPE C				OTHER THAN		
FC	R		NUMBER FILED			NUMBER EXTRA			RATE	П	FEE	1 1	RATE	FEE	
ВА	SIC FEE	97 10 10 10									345.00	OR		690.00	
TOTAL CLAIMS			7 minus 20=			*			X\$ 9=	-		OR	X\$18=		
IND	EPENDENT CL	AIMS) minus 3 =			•			X39=			OR	X78=		
MULTIPLE DEPENDENT CLAIM PRESENT									+130=	_		OR	+260=		
* If the difference in column 1 is less than zero, enter "0" in column 2									TOTA			OR	TOTAL	1090-	
CLAIMS AS AMENDED - PART II									SMALL ENTITY OR				OTHER THAN SMALL ENTITY		
	(Column 1) (Column 2) (Column 3)								SMAL	_		OR	SWALL		
AMENDMENT A	2013 140	REM.	AINING TER IDMENT		PR	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE		ADDI- FEE		RATE	ADDI- TIONAL FEE	
	Total	*		Minus	Ä,		=		X\$ 9=			OR	X\$18=		
	Independent	*	NI OE MI	Minus	, L	DENIT CLAIM	=		X39=			OR	X78=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM												OR	+260=		
									TOTA DDIT. FE			OR	TOTAL ADDIT. FEE		
			umn 1)			Column 2)	(Column 3)	•	.•						
AMENDMENT B		REM AF	AIMS AINING TER IDMENT		PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*		Minus	**	·	=	Ì	X\$ 9=	-		OR	X\$18=		
	Independent FIRST PRESE	*	N OF M	Minus ,	***		=		X39=			OR	X78=		
	FINST FRESE	INTATIC	JN OF WI		LIVE	DENT CLAIM		ſ	+130=	:		OR	+260=		
								A	TOTA DDIT. FE	AL EE		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)															
AMENDMENT C		REM AF	AIMS AINING TER IDMENT		PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*		Minus	**		=		X\$ 9=			OR	X\$18=		
	Independent	*		Minus	**1		= .		X39=	十		OR	X78=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							\vdash		+		OR			
	If the entry in colu	mn 1 ie l	ass than t	ne entry in colu	ımn 9	write "0" in co	lumn 3	L	+130=			OR	+260=		
	If the "Highest Nu "If the "Highest Nu	mber Pro Imber Pr	eviously Pa eviously Pa	aid For" IN THI aid For" IN THI	S SPA	ACE is less tha ACE is less tha	in 20, enter "20." in 3, enter "3."		TOTA DDIT. FE	EL			TOTAL ADDIT. FEE		
	The "Highest Nun	nber Pre	viously Pa	id For" (Total o	r Inde	pendent) is the	highest number	four	nd in the	appr	opriate box	x in col	lumn 1.		

Application or Docket Number